

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6009336	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 06/10/2016
NAME OF PROVIDER OR SUPPLIER CARLINVILLE REHAB & HCC			STREET ADDRESS, CITY, STATE, ZIP CODE 751 NORTH OAK STREET CARLINVILLE, IL 62626		
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S 000	Initial Comments Annual Licensure and Certification Complaint #1643020/IL85947	S 000			
S9999	Final Observations STATEMENT OF LICENSURE VIOLATIONS 300.610a) 300.1210b) 300.1210 d)2)5) 300.1220b)3) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing	S9999			

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

07/01/16

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S9999	<p>Continued From page 1</p> <p>care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: 2) All treatments and procedures shall be administered as ordered by the physician. 5) A regular program to prevent and treat pressure sores, heat rashes or other skin breakdown shall be practiced on a 24-hour, seven-day-a-week basis so that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that the pressure sores were unavoidable. A resident having pressure sores shall receive treatment and services to promote healing, prevent infection, and prevent new pressure sores from developing.</p> <p>Section 300.1220 Supervision of Nursing Services b) The DON shall supervise and oversee the nursing services of the facility, including: 3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan</p>	S9999			

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S9999	<p>Continued From page 2</p> <p>shall be reviewed at least every three months. Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>THESE REQUIREMENTS WERE NOT MET EVIDENCED BY:</p> <p>Based on interviews, observations and record review, the facility failed to identify, assess, monitor and prevent new pressures sores from developing for 5 of 8 residents (R1, R6, R8, R9 & R10) reviewed for pressure ulcer treatment and prevention in the sample of 15. This failure resulted in a decline of the ulcer for R9 evidenced by an increase in size and 90% slough wound bed in one week.</p> <p>Findings include:</p> <p>1. The Minimum Data Set (MDS), dated 5/16/16, identifies R9 as having severe cognitive impairment who requires extensive to total assist of two staff for all activities of daily living except eating. The MDS documents R9 to be always incontinent of bowel and bladder. The Braden Scale, dated 5/17/16, scores R9 at high risk for pressure ulcers. The Care Plan, dated 5/17/16, identifies R9 to have an in-house acquired sacral pressure ulcer with interventions directing staff to assess skin with all cares and report, air flow mattress and wheelchair cushion, (offloading) boots, float heels in bed and turn/reposition every two hours and more frequently if needed in part. R9's June 2016 Physician's Order Sheet (POS) includes an order to cleanse the sacral ulcer, apply Puracel (cut to size) cover c (with) sacral foam dressing every three days, Sure prep right hip (5/20/16) and cover with Optifoam border, and</p>	S9999			

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S9999	<p>Continued From page 3</p> <p>Sure Prep to blister inner right knee and cover with border gauze every shift until healed. R9's Registered Dietician Evaluation, dated 5/5/16, documents R9's Albumin is low at 3.1 (normal 3.4-5.)</p> <p>On 6/7/16 at 9:15 AM, R9 was transferred to bed by E4, Certified Nurses Aide (CNA), and E6, Registered Nurse (RN). R9 had been incontinent of bowel/bladder and had deep creases across both buttocks, upper thighs and hips. R9 had a folded top sheet in between his knees and protective boots bilateral. R9's dressing (undated) on his coccyx was loose on the bottom edge and had bowel movement inside. The wound base was visible without moving the dressing and the base was pink, very sloughy with irregular edges. R9 had a dressing (dated 6/6/16) on his mid left buttock, and an open blister looking area on inner right knee that did not have the dressing on it as ordered. R9 was provided poor incontinent care and left on his right side. R9's deep creases remained at 9:50 AM. R9 was observed every 15 minutes through 11:57 AM to remain on his right side without repositioning. The soiled loose coccyx dressing had not been changed as of 11:57 AM according to E4 who was in the room getting him up for lunch.</p> <p>The Pressure Ulcer Weekly Wound Evaluation, dated 5/31/16, documents R9's sacral ulcer was acquired on 2/8/16, had light drainage, granulation present (beefy red), stage II 2 cm (centimeter) x 3 cm x 0.1 cm, no tunneling, wound edges attached and flat, no infection suspected, no inflammation and no treatment change. The Weekly Wound evaluation dated 6/7/16 documents decline - measuring 3.8 cm x 2.6 cm x <0.2 cm slough tissue present (90% slough covered), serosanguinous purulent</p>	S9999			

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S9999	<p>Continued From page 4</p> <p>moderate drainage with macerated reddened periwound tissue, no infection/inflammation present. The physician was notified and treatment orders were changed. Under the comments section of the evaluation, it documents "area to sacrum has worsened. MD (medical doctor) is aware staff was educated on turning/repositioning, Resident is last up, first to go down." R9's Care Plan was not revised according to the evaluation.</p> <p>The Weekly Wound Evaluation for R9's knee, dated 6/10/16, documented the knee ulcer acquired in house 5/9/16 as a blistered area, dry, closed measuring 1 cm x 1 cm.</p> <p>On 6/8/16 at 9:07 AM, R9 was in bed on his right side. R9 remained on his right side throughout the morning until after 12:00 PM based on every 15 minutes observations. R9 remained in bed for lunch on his right side.</p> <p>The facility's policy/procedure entitled "Pressure Ulcers/Skin Breakdown - Clinical Protocol," dated 2/2014, documents that staff will attempt to identify cause contributing to skin breakdown and implement appropriate preventative measures. The Policy documents the physician will document pertinent orders to be carried out for pressure ulcers.</p> <p>2. The MDS, dated 5/17/16, identifies R1 has cognitive impairment and requires extensive to total assistance of staff for bed mobility, transfers and bathing/hygiene. The MDS documents R1 is always incontinent of urine and occasionally incontinent of bowel. The Care Plan, dated 5/20/16, documents R1 is at risk for pressure ulcers due to immobility with the goal to have intact skin, free of redness blisters and</p>	S9999			

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S9999	<p>Continued From page 5</p> <p>discoloration. Interventions include: assess skin with all cares, weekly skin assessments, cushion to chair, incontinent care as needed, turn and reposition every 2 hours and more often if needed. The Weekly Skin Assessment, dated 6/2/16, documents no new skin issues and no pressure ulcers.</p> <p>On 6/7/16 at 7:55 AM, R1 was in the wheelchair in the dining room for breakfast. R1 was under constant observation throughout breakfast and at 9:18 AM, E3 Assistant Director of Nurses (ADON) propelled R1 to the hallway outside his room. At 9:50 AM, R1 was taken to the shower room to be repositioned by E4 and E5, Certified Nurse Aides (CNA), who just grabbed the straps of the lift pad and pulled him up in the chair. No off loading was done. R1 was then taken to his room. R1 had regular socks on with no shoes. At 10:05 AM, R1 was lifted to bed via a mechanical lift. R1 had deep creases throughout his hips, buttocks and upper thighs. R1 had a deep red area inner left buttock and a broken blister at the base on his fifth toe which was the size of a dime. R1 grimaced when the foot was moved. There was no dressing on the toe. E4 and E5 positioned R1 on his right side with no padding or protection on his feet and nothing between his knees which were held together.</p> <p>The Progress Notes, dated 6/7/16 at 10:33 AM, documents R1 to have a "new area noted to left pinky toe - appears to be a blister that has popped et (and) res stated his toe rubbed on his shoes, new order received for Hydrogel et dry dressing daily." No changes were made to the Care Plan to include preventative measures on his feet.</p> <p>On 6/8/16 at 9:07 AM, R1 was in bed on his right</p>	S9999			

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S9999	<p>Continued From page 6</p> <p>side. He had regular socks on his feet and no treatment/dressing on the blistered area on the base of his small toe as ordered the previous day. R1 grimaced when E3 removed his sock. E3 looked in his sock and in his bed and was not able to locate the dressing. R1 laid on his right side with the head of the bed elevated throughout the entire morning with observations done every 15-20 minutes until 11:30 AM when he go up for lunch. R1 was taken to lunch without wearing shoes.</p> <p>On 6/9/16 at 12:30 PM, E2, Director of Nurses (DON), provided the wound weekly evaluation that identifies R1's toe wound as a "non-pressure" sore even though E1 identified it from rubbing on his shoe. The eval was dated 6/7/16 and documents the area as acquired during stay, moist, popped blister, no drainage, measuring 1 cm (centimeter) x 1 cm. The facility has not implemented any prevention measures for his feet or regarding shoes in an effort to prevent further breakdown.</p> <p>3. The MDS, dated 5/10/16, identified R6 as being cognitively intact requiring extensive assist of one to two staff for all activities of daily living. The MDS documents R6 is always incontinent of bowel and bladder. R6's June 2016 Physician Order Sheets (POS) document an order for Calmoseptine to coccyx and buttocks every shift (5/24/16.) The Care Plan, dated 5/12/16, documents R6 is at risk for pressure ulcers with a goal to have skin intact, free of redness, blisters or discoloration by/through next review. Interventions include treatment as ordered, weekly skin checks, turn/reposition every two hours and more often if needed, and pressure relieving devices to wheelchair and bed.</p>	S9999			

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S9999	<p>Continued From page 7</p> <p>On 6/8/16 at 1:19 PM, R6 was transferred to bed via a mechanical lift by E5 and E7, CNA. R6 stated she had been in the chair since her shower at 7:00 AM. E5 stated she had toileted R6 at 11:30 AM, but R6 did not recall that. E5 and E7 rolled R6 to her right side. The back of her pants were wet throughout the buttocks area and upper thighs. Her incontinent brief was saturated with urine and was soiled with bowel movement. R6's coccyx had a small pea size open area directly on the coccyx that was covered with cream. E5 stated the facility had identified that earlier and documented it.</p> <p>On 6/8/16, E2 provided the Wound Weekly Evaluation, dated 6/8/16, which identifies R6's coccyx ulcer, but does not include measurements. The description of periwound has "none" checked with no infection or inflammation present. The comment section documents "red area to coccyx and peri area and posterior thighs" continuing on to document that R6 is being treated with an antibiotic and has had an increase urinary output as she receives Lasix daily. The evaluation failed to include staging on the small open area noted on her coccyx.</p> <p>4. On 06/07/16 from 6:45 AM to 10:15 AM, under constant observation, R8 was observed sitting up in a high back wheelchair in a tilted back position. At 9:37 AM, E14, CNA was observed telling E15, Licensed Practical Nurse (LPN), that R8's wheelchair had been stuck in the same position and could not be repositioned. R8 was taken down to the dining room via wheelchair to an activity without being toileted or checked for incontinence.</p>	S9999			

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S9999	<p>Continued From page 8</p> <p>On 06/08/16 at 9:45 AM, E5 and E18, CNAs, were observed during transfer for R8. A skin check was done. R8's buttocks were reddened and deeply creased with a new, unidentified open area near the coccyx/sacral region, measuring approximately 1.0 cm x 1.0 cm. The area was partially denuded with some redness in the center. E3 used skin prep around the open area and placed a hydrocolloid foam dressing on the open area. No wound cleanser was used and no perineal care was performed at this time. E5 and E18 stated that they work with R8 often and had not noticed any skin breakdown until now. E3 stated R8 has an order to apply a barrier cream to the buttocks on every shift or as needed.</p> <p>The POS, dated 06/01-30/16, documented R8 had the following diagnoses, in part as, Alzheimer's Disease, Mental Disorders due to known physiological condition. The MDS, dated 06/03/16, documented R8 is severely cognitively impaired with short and long term memory deficits. It documented R8 requires total assistance of at least two staff for transfers, dressing and toilet use. It also documented R8 requires total assistance of at least one staff for locomotion, hygiene and bathing. The MDS also documented R8 had no pressure ulcers as of this date.</p> <p>The Care Plan, dated 06/06/16, documented R8 was identified as potential for developing a pressure ulcer, incontinent of bowel and bladder and immobility. The interventions were listed, in part as, assess, record and monitor wound healing and turn and reposition every two hours and more often as needed.</p> <p>The Braden Scale for predicting pressure ulcer development, dated 03/08/16, documented R8</p>	S9999			

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S9999	<p>Continued From page 9</p> <p>was at high risk for developing a pressure ulcer. The Weekly Pressure Ulcer Report, dated 05/30/16, did not have R8 listed as having a pressure ulcer. The Weekly Pressure Ulcer Report, dated 06/09/16, listed R8 as having a facility acquired Stage II pressure ulcer of the coccyx/sacral region measuring 1.0 cm x 1.0 cm x 0.1 cm. The Weekly Skin Check, dated 06/08/16, documented R8 had no new areas of skin impairment or no new changes this week.</p> <p>5. R10's Care Plan Initiated 06/17/2016 documents R10 is at risk for pressure ulcers and needs turned and repositioned every 2 hours and as necessary.</p> <p>On 6/7/2016, R10 was sitting in a geriatric chair with bilateral feet slightly edematous and dangling without support starting at 6:45 AM in dining room. At 9:20 AM, E13, Registered Nurse (RN), pushed R10 over to television area where she remained until removed by E4, CNA, at 12:07 PM. At 12:07 PM, E4 and E5, CNA, took R10 to her room. E5 stated that they were going to reposition R10. R10 was pushed into her room with E4 and E5 grabbing the straps on the mechanical lift pad under R10 and pulled upwards only and E3 was present during this time.</p> <p>On 6/9/2015 at 10:20 AM, E3 was asked if just lifting up on mechanical lift pad under a resident is considered repositioning? E3 stated she didn't agree with repositioning a resident with just using the mechanical lift pad straps being lifted up by staff and resident being put back down.</p> <p>The Nursing Services Policy and Procedure Manual (Revised April 2013) documents Intervention/Care Strategies "#4. Residents who</p>	S9999			

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S9999	Continued From page 10 are in a chair should be on an every hour (q 1 hour) repositioning schedule." Preparation documents "#1. Review the residents care plan to evaluate for any special needs of the resident." (B) 300.610)a 300.1210b)2) 300.1210d)3) 300.1220b)3) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care	S9999			

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S9999	Continued From page 11 plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. Restorative measures shall include, at a minimum, the following procedures: 2) All nursing personnel shall assist and encourage residents so that a resident who enters the facility without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable. All nursing personnel shall assist and encourage residents so that a resident with a limited range of motion receives appropriate treatment and services to increase range of motion and/or to prevent further decrease in range of motion. d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: 3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record. Section 300.1220 Supervision of Nursing Services b) The DON shall supervise and oversee the nursing services of the facility, including: 3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as	S9999			

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S9999	<p>Continued From page 12</p> <p>are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months.</p> <p>Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>THESE REQUIREMENTS WERE NOT MET EVIDENCED BY:</p> <p>Based on interview, observation and record review, the facility failed to ensure that appropriate treatments and services including correct Passive Range of Motion (PROM) and splints are provided as needed for 3 of 7 residents (R1, R8, R10) reviewed for range of motion and positioning in a sample of 15. This failure resulted in R1 developing further contracture and skin breakdown.</p> <p>Findings include:</p> <p>1. The Minimum Data Set (MDS), dated 5/17/16, identifies R1 to have cognitive impairment and requires extensive to total assistance of staff for bed mobility/transfers and has limitations upper/lower on one side. The MDS documents R1 gets PROM (Passive Range of Motion) 5 days a week. The Care Plan, dated 5/20/16, identifies R1 to have contractures on the left side since a Cerebral Vascular Accident (CVA) with an intervention for staff to do PROM to left side 5-10 repetitions to each joint BID (twice daily.)</p> <p>On 6/7/16 at 7:45 AM, R1 was in the dining room</p>	S9999			

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S9999	<p>Continued From page 13</p> <p>in his wheelchair. There were no pedals on his wheelchair and his legs were dangling off the seat of the chair with no support to his feet. R1's left arm was contracted up against his chest and his hand was contracted into a ball. He had no protector in his hand. R1 had a elbow protector on his left arm which had slid down into the antecubital area. R1 was poorly positioned and repeatedly leaned over to his right side with his head off the wheelchair. At 10:05 AM, E4 and E5, Certified Nurses Aides (CNA), transferred R1 to bed via a mechanical lift. R1 appeared to have foot drop. E4 stated R1's left hand does not open, but E5 stated he can open it and assisted R1 in stretching out his fingers. R1's fingernails were very long. R1 moaned when his fingers were opened. R1 laid on his right side throughout the rest of the morning with his left arm drawn up to his chest.</p> <p>On 6/8/16 at 9:15 AM, R1 was in bed and had a palm protector in place on his left hand. R1 wore it throughout the day.</p> <p>On 6/9/16 at 10:00 AM, R1 again had his palm protector on. At 2:20 PM, E8, CNA, removed the protector and stated she only does PROM on R1's left side. E8 attempted PROM on R1's hand with no range done on his fingers and no opposition of the thumb was done. E8 failed to do abduction/adduction on the left hand fingers, no range was done for the toes at all and no internal/extension or abduction/adduction of the hip was done. E8 stated she has worked with R1 for about 7 months and has seen some improvement.</p> <p>A progress note, dated 6/8/16, documents "PT (Physical Therapy) is to evaluate and treat left AC (antecubital) Fossa laceration and flexion</p>	S9999			

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S9999	<p>Continued From page 14</p> <p>contractor after CVA to open the area, increase range of motion and more air."</p> <p>On 6/9/16 at 2:49 PM, E2, Director of Nurses (DON,) stated the hand device is not a splint, but a palm protector as a nursing measure and that she ordered it about a month ago. E2 stated R1 should have the palm protector in daily.</p> <p>A Joint Mobility Assessment completed by E9, Occupational Therapist (OT), dated 9/9/15, documents daily Left side PROM's per facility protocol. Measurements document all left side joints as having severe limitations of 1-25% range. On 3/23/16, the joint mobility assessment shows severe for all left side joints except the left knee improved from moderate/severe to minimal. On 6/9/16, an additional occupational plan of care was completed and documents R1 "presents with flexion contracture, as did appear on admission to this facility on 7/8/14. Patient was previously place on left upper extremity PROM and hygiene program with restorative at time of OT dc (discontinued) in August 2014. "Patient not always compliant with restorative" and "patient refusing to allow caregiver staff to provide daily, adequate ROM (Range of Motion) to let elbow to prevent further contracture and skin breakdown. Patient now presents with increased flexion contracture, such that he is developing skin breakdown in the antecubital fossa."</p> <p>The Care Plan fails to show R1's refusals nor does it include a plan to ensure R1 receives the ROM when he does refuse and the palm protector daily. Documentation for PROM from 5/25/16 through 6/9/16 shows R1 did not receive ROM at all 5/31/16 and was documented as done one time per day for 4 of 15 days.</p>	S9999			

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S9999	<p>Continued From page 15</p> <p>The facility's policy/procedure entitled "Range of Motion," dated 10/2010, documents it purpose it to exercise the resident's joints and muscles. The Guidelines document staff are to support the extremity at the joint as it is being exercised, move each joint through its range of motion three times unless otherwise instructed, move each joint gently, smoothly, and slowly through its range of motion, and remember to stop at point of pain. The steps in the procedure documents staff are to position resident in the supine position, if permitted remove the pillow. The steps then go through each joint including the toes and fingers. Documentation should be recorded in the medical record and include if and how the resident participated in the procedure or any changes in the resident's ability to participate, any problems or complaints made by the resident, documents refusals and interventions taken to address refusals.</p> <p>2. On 06/07/16, R8 was observed to have severely contracted hands. On 06/07/16 and 06/08/16, R8 was observed at varying times throughout the day with no preventative measures to help maintain or improve the range of motion in her hands.</p> <p>The June 2016 Physician Order Sheets (POS) documented R8 had joint contractures. The Care Plan, dated 06/06/16, documented R8 was to have Passive Range of Motion exercises and after place either carrots or posey hand rolls in R8's hands while awake and can tolerate. The MDS, dated 06/03/16, documented R8 was severely cognitively impaired and required total assistance with dressing, hygiene, bathing and toilet use. It also documented R8 had limited Range of Motion in both the upper and lower</p>	S9999			

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S9999	<p>Continued From page 16</p> <p>extremities.</p> <p>On 06/09/16 at 4:20 PM, E2 stated that R8 was to have devices in her hands to prevent further decline of the hand contractures, and that R8 had been known to remove splints after staff had applied them to her hands.</p> <p>3. Intermittent observation on 6/7/2016 starting at 6:45 AM through 11:25 AM of R10 sitting in geriatric chair with bilateral slightly edematous feet dangling in space.</p> <p>On 6/7/2016 at 11:25 AM, E12, CNA, was asked about R10's feet being unsupported. E12 stated we can elevate feet when we put the reclining back of the chair back.</p> <p>R10's Care Plan, Revision date 09/02/2015, documents the intervention to elevate feet as much as possible.</p> <p>(B)</p>	S9999		